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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Doc	ket No. 0402/	00620
First Named Inv	entor or Application Identifier	Toshiyuki Sano et al.
Title	SOLID STATE	MAGING APPARATUS
Express Mail	Label No.	25

ण . लू new nonprovisional applications under 37 C.F.R 1.53(b))

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				Commissioner for	Patents	
APPLICATION	ELEMENTS		ADDRESS TO:	Box Applications Washington, D.C.		
	[Total Pages th below] ention ed Applications sponsored R & D appendix on ention rawings (if filed) [Total Page [9. PAG 10. 9s [4]] 11. 12. (d)) 13. 14. ventor(s) CFR 16. x and supply the required invariant in-part (CIP) Group/Art disclosure of the prisclosure of the according to the	Nucleotide and/Submission (if and Submission (ii)) ACCOMPAN Statements ACCOMPAN ACCOMPAN ACCOMPAN ACCOMPAN ASSIGNMENT Paper For ASSIGNEE INI The Information Dissipation (IDS) Preliminary Ame Return Receipt (Should be specified copy of (if foreign priority) Other: Audition of prior application Not application, from with the properties of application applic	uter Program (Appen or Amino Acid Sequi- applicable, all necess eadable Form (CRF) equence Listing on: M or CD-R (2 copies) verifying identity of YING APPLICA rs (cover sheet & do FORMATION Statement Poi an assignee) fron Document (if application Document (if application Document) ending (MPEP 503 crifically itemized) of Priority Document(try is claimed) which a copy of the or and is hereby incorpo-	ence sary) i); or above copies TION PARTS icument(s)) SEE NEXT ower of Attorney iolicable) Copies of IDS citations ii) (s) ary amendment, or in an ath or declaration is orated by reference	
	17.	CORRESPONDENC	E ADDRESS			
Customer Number or Bar Code Label		here)	or correspondence address below			
NAME	1.000		olly Bove Lodge &	: Hutz LLP		
		**	Suite 800			
ADDRESS			1990 M Street, N	I.W.		
CITY	Washington	STATE	DC	ZIP CODE	20036-3425	
COUNTRY	U.S.A	TELEPHONE	(202) 331-7111	FAX	(202) 293-6229	

				Fee Calculatio	n and Trans	mittal			
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TOTAL	3	minus	20	= 0	x9=	\$		x18=	\$0
INDEP	1	minus	3	= 0	x40=	\$		x80=	\$0
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Base Filing Fee					\$355			\$710	
Other Fee (specify purpose) Assignment recordation					\$			\$40	
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니	A check in the amount of \$ to cover the filing fee is enclosed
	No payment is enclosed at this time. Full payment will be made when the executed Declaration is submitted.
\times	The Director is hereby authorized to charge and credit Deposit Account No. 22-0185 as described below. A duplicate
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Assignee Name and address:

Matsushita Electric Industrial Co., Ltd. 1006, Oaza Kadoma, Kadoma-shi Osaka 571-8501 JAPAN

Name (Print/Type)	Morris Liss Registration No. (4		24,510
Signature	Nova	Date	1/16/01